



University Withdraw Form

Student Instructions:

- 1. If you only wish to withdraw from a single course, you must complete a **Single Course Withdraw Form** instead of this form.
- 2. If you wish to obtain a **Medical Withdraw**, please see University Counseling & Health (208 Danna Center) instead of this form.
- 3. Print form and complete all sections.
- 4. Obtain required signatures.
- 5. Completed form must be submitted to the Office of Student Records to be processed.

Section 1: Student Information

Name (Last, First, Middle): _____ CWID: _____

College: CAS BU MA CNH LAW

Effective (eg, 2018 Fall): _____ (Year) _____ (Term) Date: _____

University Withdraw: *Leave of Absence: → *Indicate Date of Return (1 Year MAX): _____ (Year) _____ (Term)

Reason for Withdraw/Leave: _____

**Leave of Absences will not be granted to Undergraduates who have a GPA of less than 2.00 or a graduate student with less than 3.000, or those who transfer to another University, or to Transient students.*

Section 3: Student Statement & Signature

I acknowledge that the above information is accurate and I understand that withdrawing from the University will reflect a graded "W" on my transcript for my enrolled courses. I understand that this may affect my degree progress, financial aid, scholarships, veteran's benefits, and/or other areas. I have researched these issues and understand the possible implications of this action.

Signature: _____ Date: _____

Section 4: Required Signatures

Check and Obtain signatures that apply. **Required for all Students*

*Student Success Center (239 Monroe Library): _____

*Associate Dean of College: _____

*Student Financial Services (406 Thomas Hall): _____

*Student Affairs (205 Danna Center): _____

Residential Life (1st FL, Beaver Hall): _____

Veteran's Benefits: _____

Section 5: Approval

Once completed, this form must be turned in, by the student listed above, to the Office of Student Records located in Thomas Room 204.

Office Use:

Comments: _____

Signature of Student Records Representative: _____ Date: _____